

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below-named inventor, W. Karl Olander, Jose L. Arno, do hereby declare that my residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **"METHOD AND APPARATUS FOR THE RECOVERY OF VOLATILE ORGANIC COMPOUNDS AND CONCENTRATION THEREOF"**, the specification of which

(check one) ☐ is attached hereto.
☒ was filed on November 24, 2003 as Application Serial No. U.S. 10/720,398
☐ and was amended _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed
☐ Yes ☒ No

| (Number) | (Country) | (Day/Month/Year Filed) |
|----------|-----------|------------------------|
|----------|-----------|------------------------|

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this specification is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

| (Application Number) | (Filing Date) | (Status-Patented, Pending, abandoned) |
|----------------------|---------------|---------------------------------------|
|----------------------|---------------|---------------------------------------|

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

WILLIAM RYANN, Reg. No. 44,313
STEVEN J. HULTQUIST, Reg. No. 28,021
MARGARET CHAPPUIS, Reg. No. 45,735

Docket No. ATMI-608-CIP

All correspondence in connection with this application should be sent to:

**William F. Ryann
ATMI, Inc.
7 Commerce Drive
Danbury, CT 06810
Telephone: (203) 794-1100**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of first inventor: W. Karl Olander

Inventor's Signature



Date 3/29/04

Residence: 19616 Gulf Boulevard, #301, Indian Shores, FL 33785

Citizenship: U.S.

Post Office Address:

(if different from
Residence Address)

Full Name of second inventor: Jose I. Arno

Inventor's Signature

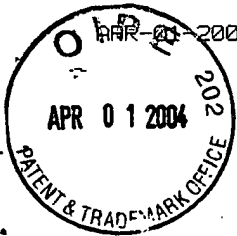
Date _____

Residence: 13 Twilight Lane, Brookfield, CT 06804

Citizenship: Spain

Post Office Address:

(if different from
Residence Address)



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ATMI LEGAL DEPT

203 797 2544 P.08/11

Docket No. ATMI-608-CIP

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Prior Foreign Application(s)

| (Number) | (Country) | (Day/Month/Year Filed) | Priority Claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
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Full Name of first inventor: W. Karl Olander

Inventor's Signature _____ Date _____

Residence: 19616 Gulf Boulevard, #301, Indian Shores, FL 33785

Citizenship: U.S.

Post Office Address:

(if different from
Residence Address)

Full Name of second inventor: Jose L. Arno

Inventor's Signature  Date 3/25/04

Residence: 13 Twilight Lane, Brookfield, CT 06804

Citizenship: Spain

Post Office Address:

(if different from
Residence Address)